								Ĭ	Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR									D 10/283/04						
CLAIMS AS FILED - PART I								SMALL	. EN	ITITY		OTHER			
T = 6	TAL OLABAG	·	(Column 1) (Column 1)			mn 2)	TYPE				OR	SMALL	· · · · · ·		
TOTAL CLAIMS			34						FEE		RATE	FEE			
FOR			NUMBER FILED NUMB		ER EXTRA		BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00			
TOTAL CHARGEABLE CLAIMS			36 minus 20= .*		*	16	XS 9=		=	144	OR	X\$18=			
INDEPENDENT CLAIMS			(minus 3 = *		(X43= 4		43	OR	X86=				
MULTIPLE DEPENDENT CLAIM PRESENT								+145	_		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2									L.	612	OR	TOTAL			
O 1 O CLAIMS AS AMENDED - PART II									[11-2		OTHER	THAN		
1/-	(Column 1) (Column 2) (Column 3							SMAL	LL E	NTITY	OR.	SMATL			
AMENDMENT A		CLAIMS REMAINING		HIGHE NUMB		PRESENT		T/ATC	_	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AFTER AMENDMENT		PREVIO		EXTRA		PATE		FEE		DATE	FEE		
	Total	. 20	Minus	77				/xs 9:	= <i>X</i>	,	OR	X\$18=			
	Independent	. 4	Minus	****	<u>Z</u>	=	1	X43 ₇	7		OR	X86=			
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		1	+ 1/45	_		OR	+290=			
								7 101	AL			TOTAL			
	(Column 1) (Column 2) (Column 3)								ADDIT. FEE ADDIT. FEE						
ENDMENT B		CLAIMS	T	HIGHE	ST		1 /r		Т	ADDI-			ADDI-		
		REMAINING AFTER		NUMB PREVIO	USLY	PRESENT EXTRA		RATE	≣	TIONAL		RATE	TIONAL		
	*	AMENDMENT		PAID F	OR		1		\dashv	FEE		V040	FEE		
	Total	*	Minus Minus	**		=		X\$ 9:	_		OR	X\$18=			
AM	Independent	FIRST PRESENTATION OF MULTIPLE		***	CLAIM		X43			· 	OR	X86=			
	FINOT FACOL	JETH CE DE	LINDEIN	O.D. KIIVI			+145	=		OR	+290=				
			-		•		, r	TOT			OR	TOTAL ADDIT, FEE			
		(Column 1)	1	(Colum	n 2)	(Column 3)	•	ADDIT. F	EE 6	<u></u> -	•	ADDIT. FEE			
	`	CLAIMS		HIGHE	ST		1 1			ADDI-	1		ADDI-		
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	=	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**	ON	=	 	X\$ 9:		<u> FEE</u>	00	X\$18=			
	Independent	* .	Minus	***		=			-+		OR				
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI							X43=	_		OR-	X86=			
								+145:	=		OR	+290=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR	TOTAL ADDIT, FEE			
***	If the "Highest Nu	mber Previously Pai	aid For" IN THI	S SPACE is	less tha	in 3, enter "3."	•			ropriate bo	- x in co				
		,	-			-									